

2139 Silas Deane Highway  
Suite 205  
Rocky Hill, CT 06067  
(860) 257-8066

Amy DiMauro, LCSW, President  
Stephen A Karp, LMSW, Executive Director  
[naswct@naswct.net](mailto:naswct@naswct.net)

**Testimony on SB 278  
AAC Nursing Home Facility Minimum Staffing Levels  
Human Services Committee  
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The National Association of Social Workers, Connecticut chapter, supports SB 278. The Public Health Code is woefully inadequate when it comes to the beds-to-worker ratio for social work services. The current ratio of 120 beds to 1 full-time social worker dates back well over 30 years and bears no resemblance to a reasonable ratio for the current nursing home population. In essence, we are using a 20<sup>th</sup> century ratio to address 21<sup>st</sup> century needs of nursing home residents, families and facility staff.

In just the past 10 years the presenting issues by seniors entering nursing homes has become much more acute in terms of complex diagnosis and mental health status. The degree of care needed demands greater attention by the nursing home social worker, yet the staffing ratio for nursing home social work has not been adjusted in accordance with these changing needs. **The current ratio is absurd, outdated, undoable, and downright insane, and is a major factor in why qualified social workers burn out and leave the field of nursing home social work.**

Nursing home social workers face multiple tasks and responsibilities including but nowhere near limited to: prompt referral for patients and families in financial need, helping each patient to adjust to the social and emotional needs related to nursing home placement, care plan meetings, staff meetings, developing plans of care for the social and emotional needs of the resident, counseling residents and family members, discharge planning, coordinating care with outside services, dealing with issues of conservatorship, protecting resident rights, assessing cognitive and mental functioning, dealing with resident to resident altercations, providing emotional support for residents coping with loss of independence and function, and staff training on resident rights. Then add an increasingly extensive amount of paperwork that includes: assessments; care plans; Mini Mental Status Exams; the new MDS 3.0 (Minimum Data Set) done upon admission, quarterly, annually and when a change in condition occur, Medicaid clinical evaluations, plus medical record charting of any changes with the resident. All of this and more is required of the social worker at a ratio of 1 full-time social worker to 120 residents.

A national study of nursing home social work found that the social worker has approximately **7 minutes per resident per week** under the 120/1 ratio. A time study performed by a nursing home social work supervisor in CT estimated 11 minutes per week per resident. It is impossible to provide for the psychosocial needs of residents at an average of 9 minutes per week.

In the spring of 2010 NASW/CT conducted a survey of nursing home social workers. We had a response rate of 50% of all Connecticut nursing homes. When asked what their biggest challenge was 72% of social workers answered it was lack of time to effectively perform their job. It is not uncommon to hear from our members who practice in nursing homes that they are working 60-70 hour weeks and still are not able to keep up with the patient care work. Only a reduction in the minimum bed to worker ratio can fix this problem.

The social worker is the only staff person in a nursing home that has the responsibility for the psychosocial needs of residents. Federal quality investigation of psychosocial services among residents on Medicare Part A

identified 39% of residents with psychosocial needs having inadequate care plans. Insufficient staffing and lack of time were reasons cited.

A National study of nursing home social workers found that the recommended ratio for beds to worker for long term care was 60 beds to 1 social worker and for sub-acute care beds the recommended ratio is 20 beds to 1 social worker. SB 278 takes these recommendations of practice standards into account by recommending a two-step process that initially reduces the ratio to 80 beds per worker this year and reaching the recognized practice standard of 60 beds to 1 social worker in 2020 (we note that recreation therapists staffing are already based on 60 beds per therapist). This two phase approach allows for facilities to ease into this change of staffing while offering an immediate degree of expanded services to residents, family members and staff.

Connecticut has four graduate schools of social work, with two more programs expected to come onboard within the next three years. We also have 6 undergraduate programs for baccalaureate social work, with 1 additional program starting. The graduates from these programs, plus those from schools near the CT borders, provides for a social work workforce in Connecticut that has a sufficient pool of professional social workers to fill additional positions in nursing homes. Furthermore, we note that the fiscal impact on facilities is minimal given the salaries paid are typically \$16.00-20.00 per hour for a BSW and for a MSW it is generally in the range of \$23.00-26.00 per hour.

Nursing home residents, family members and facility staff all benefit from services provided by a facility's social worker. But at the minimum staffing level the amount of social work services that can be offered is limited due to lack of time to meet presenting needs. SB 278 is a two-step remedy that will assure that residents, their family members and facility staff have access to the psychosocial services required under both federal and state regulations. We urge passage of SB 278 in the 2016 session. Thirty plus years after the minimum staffing level was set it is time for an update!